

# PART B—ISSUE FEE TRANSMITTAL

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advances orders and notification of maintenance fees will be mailed to addressee entered in Block 1, unless you direct otherwise, by: (a) specifying a new correspondence address in Block below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. **See reverse for Certificate of Mailing.**

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|--|--|---|--|--|--|
| <b>MAIL ROOM</b><br><b>34 AUG 29 1994</b><br><b>PTO &amp; TRADEMARK OFF.</b> |  | <b>1. CORRESPONDENCE ADDRESS</b><br>TOWNSEND AND TOWNSEND KHOURIE AND CREW<br>STEUART STREET TOWER<br>ONE MARKET PLAZA<br>SAN FRANCISCO, CA 94105 |  | <b>2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)</b><br>INVENTOR'S NAME<br>Street Address<br>City, State and ZIP Code<br>CO-INVENTOR'S NAME<br>Street Address<br>City, State and ZIP Code<br><input type="checkbox"/> Check if additional changes are on reverse side |  |
|--|--|---|--|--|--|

|   |             |              |                             |             |
|---|-------------|--------------|-----------------------------|-------------|
| SERIES CODE/SERIAL NO.                    | FILING DATE | TOTAL CLAIMS | EXAMINER AND GROUP ART UNIT | DATE MAILED |
| 08/046,337                                | 04/12/93    | 019          | RIVELL, J                   | 06/28/94    |
| First Named Applicant: DUNNIE, CHARLES H. |             |              |                             |             |

TITLE OF INVENTION: BACKFLOW PREVENTOR WITH ADJUSTABLE OUTFLOW DIRECTION

|                   |                |           |             |              |          |          |
|-------------------|----------------|-----------|-------------|--------------|----------|----------|
| ATTY'S DOCKET NO. | CLASS-SUBCLASS | BATCH NO. | APPLN. TYPE | SMALL ENTITY | FEE DUE  | DATE DUE |
| 3 13119-1-3       | 137-015.000    | C24       | UTILITY     | YES          | \$585.00 | 09/28/94 |

|   |  |                                      |
|---|--|--------------------------------------|
| 3. Correspondence address change (Complete only if there is a change) | 4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed. | 1. TOWNSEND and TOWNSEND<br>2.<br>3. |
|---|--|--------------------------------------|

CS14219 09/01/94 08046337 20-1430 140 242 585.00CH  
 CS14220 09/01/94 08046337 20-1430 140 561 36.00CH

## 5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

|   |                    |
|---|--------------------|
| (1) NAME OF ASSIGNEE:                                     | CMB INDUSTRIES     |
| (2) ADDRESS (CITY & STATE OR COUNTY):                     | Fresno, California |
| (3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION: | California         |

☐ This application is NOT assigned.  
☐ Assignment is being previously submitted to the Patent and Trademark Office.  
☒ Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.  
**PLEASE NOTE:** Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

|  |                   |
|--|-------------------|
| 6a. The following fees are enclosed:<br><input type="checkbox"/> Issue Fee <input type="checkbox"/> Advanced Order - # of Copies: (Minimum of 10)  |                   |
| 6b. The following fees should be changed to:<br>DEPOSIT ACCOUNT NUMBER 20-1430<br>(ENCLOSED PART C)<br><input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Advanced Order - # of Copies: 12 (Minimum of 10)<br><input checked="" type="checkbox"/> Any Deficiencies in Enclosed Fees |                   |
| The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.  |                   |
| (Signature of party in interest or record)<br>Richard L. Hughes, #31,264   | (Date)<br>8/24/94 |
| NOTE: The Issue Fee will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.  |                   |

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE

## Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Box ISSUE FEE  
Commissioner of Patents and Trademarks  
Washington, D.C. 20231

on 8/25/94  
(Date)

Arlene C. Granlund  
(Signature)

ARLENE C. GRANLUND  
(Typed or Printed Name)

8/25/94  
(Date)

Note: If this certificate of mailing is used, it can only be used to transmit the Issue Fee. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

This form is estimated to take 20 minutes to Complete. Time will vary depending upon the needs of the individual applicant. Any comments on the amount of time you require to complete this form should be sent to the Office of Management and Organization, Patent and Trademark Office, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.